

641—80.10(135) Home care aide services. Home care aide services are intended to enhance the capacity of consumers to attain or maintain their independence. Trained and supervised direct care workers provide services to consumers who, due to the absence, incapacity or limitations of the usual homemaker, are experiencing stress or crisis.

80.10(1) Program purpose. The purpose of this program is to reduce, prevent or delay inappropriate institutionalization of consumers and to preserve families through the provision of supportive services by direct care workers who have completed training and are professionally supervised.

80.10(2) Scope. The direct care worker provides services for consumers by following a plan of care identifying assigned tasks. A direct care worker participates in activities to safeguard the health and wellness of the community and to implement core public health functions and essential public health services.

80.10(3) Authorized agency.

a. The authorized agency shall establish policies for supervision of direct care workers.

b. The authorized agency shall ensure that each direct care worker has completed adequate training and demonstrated competency for each task assigned. The required preservice education for direct care workers is outlined in the following chart:

Level of Direct Care Worker	Direct Care Worker I (equivalent to chore)	Direct Care Worker II (equivalent to home helper)	Direct Care Worker III (equivalent to homemaker)	Direct Care Worker IV (equivalent to personal care)	Direct Care Worker V (equivalent to protective worker)
Scope of Services	Provides services to a consumer necessary to enable the consumer to live independently and that encompass heavier cleaning tasks, including outside maintenance and chores. For chore services, there is no physical contact between the consumer and the direct care worker	Under the supervision of a professional, provides services to protect the environment for a self-directing consumer to preserve a safe and sanitary home	Under the supervision of a professional, provides services primarily in the homes of consumers who, due to the absence, incapacity or limitations of the usual homemaker or caregiver, are experiencing stress or crisis, to promote consumer health and a safe, stable, sanitary home environment	Under the direction of nursing or medical staff, provides health-related services such as observation of self-administration of oral medications; checking the consumer's pulse rate, temperature, and respiration rate; helping with simple prescribed exercises; keeping the consumer's rooms neat; changing nonsterile dressings; providing skin care and back rubs; assisting with braces and artificial limbs; or assisting the consumer in using medical equipment	Provides services intended to stabilize a child's or adult's residential environment and relationships with relatives, caretakers, and other consumers and household members in order to alleviate a situation involving abuse or neglect or to otherwise protect the child or adult from a threat of abuse or neglect; also provides services intended to prevent situations which could lead to abuse or neglect of a child or adult when a definite potential for abuse or neglect exists
Services or tasks assigned	Heavy household cleaning, garbage removal,	Essential shopping and housekeeping	Money management, household	Personal care and rehabilitative therapies	Family preservation, family

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include, but are not limited to:	snow shoveling, changing light bulbs, putting screens on windows, covering and uncovering air conditioners, lawn care and mowing		management, consumer education, transportation, meal preparation, family preservation, family management, child care, assistance with personal care, respite, essential shopping, and housekeeping		management, money management, child care, and transportation
Preservice Education	Direct care worker possesses skills for tasks assigned	4 hours on role of the home care aide; 2 hours on communication; 2 hours on understanding basic human needs; 2 hours on maintaining a healthy environment; 2 hours on infection control in the home; and 1 hour on emergency procedures	60-hour home care aide training: A Model Curriculum and Teaching Guide for the Instruction of the Homemaker-Home Health Aide OR 75-hour certified nurse aide course and Direct Care Worker II preservice education OR Home care aide training and prior approval by the department	60-hour home care aide training: A Model Curriculum and Teaching Guide for the Instruction of the Homemaker-Home Health Aide OR 75-hour certified nurse aide course and Direct Care Worker II preservice education OR Home care aide training and prior approval by the department	Training in a department-approved curriculum
Workforce Development (per calendar year)	None	3 hours prorated to employment	12 hours prorated to employment	12 hours prorated to employment	12 hours prorated to employment
Competency	Documented skills for assigned tasks	Documented skills for assigned tasks	Documented skills for assigned tasks	Documented skills for assigned tasks	Documented skills for assigned tasks

80.10(4) Professional staff as providers of home care aide services. An individual who is in the process of receiving or who has completed the training required for LPN or RN licensure or who possesses an associate's degree or higher in social work, sociology, home economics or other health or human services field may be assigned to provide home care aide services if the following conditions are met:

- a. Services or tasks assigned are appropriate to the individual's prior training.
- b. Orientation to home care is conducted. Orientation includes adaptation of the individual's knowledge and skills from prior education to the home setting and to the role of the home care aide.

80.10(5) Care coordinator and service manager qualifications.

a. An individual performing care coordination or service management shall meet one of the following criteria:

(1) Be a registered nurse licensed to practice in the state of Iowa.

(2) Possess a bachelor's degree in family and consumer science, education, social work or other health or human services field.

(3) Be a licensed practical nurse with a current Iowa license.

b. A home care aide with an equivalent of two years' experience may be delegated care coordination/service management duties as long as a qualified individual who meets one of the criteria in paragraph "a" retains responsibility and provides supervision and evidence of supervision.

c. An individual who has provided home care aide care coordination and service management prior to June 30, 2007, shall be considered qualified to continue in the position.

80.10(6) A qualified care coordinator or service manager may provide direct care services as appropriate to the individual's level of education and competency for the assignment.

80.10(7) The service manager's scheduling duty may be delegated to an individual not possessing one of the qualifications in paragraph 80.10(5)"a" provided that a qualified individual who meets one of the qualifications in 80.10(5)"a" retains responsibility and provides supervision and evidence of supervision.

80.10(8) Consumer records. The authorized agency shall maintain records for each consumer. The records shall include:

a. An initial assessment.

b. A plan of care.

c. Assignment of direct care worker.

d. Assignment of tasks.

e. Reassessment.

f. Update of plan of care.

g. Direct care worker narrative notes.

h. Documented supervision.

80.10(9) Appropriation. The appropriation to each county is determined by the following formula: 15 percent of the total allocation shall be divided so that an equal amount is available for use in each county in the state. The following percentages of the remaining 85 percent shall be allocated to each county according to that county's proportion of state residents with the following demographic characteristics:

a. Sixty percent according to the number of elderly persons living in the county.

b. Twenty percent according to the number of persons below the federal poverty guidelines living in the county.

c. Twenty percent according to the number of substantiated cases of child abuse in the county during the three most recent years for which data is available.